Rev. 06/98 As a below-named inventor, thereby declare that:

My residence post office address and citizenship are as stated below next to my name.

DECLARATION and POWER OF ATTORNEY

Docket Number BB-1067-B

| listed below) of the | he subject matter which i | s claimed and for w | which a patent is so | ught on the invention | rst and joint inventor (if plan n entitled: | | | | | | |
|---|---|---|---|--|---|---|--|--|--|--|--|
| PLANT METHIONINE SYNTHASE GENE AND METHODS FOR INCREASING THE METHIONINE CONTENT OF THE SEEDS OF PLANTS | | | | | | | | | | | |
| | | | | | SEEDS OF PLANT | rs . | | | | | |
| i - | of which is attached here A parest 10, 1000 | | - | | anational Analiantian No | and | | | | | |
|] | ded on | - | on No. <u>09/3//</u> | 431 or PC1 into | ernational Application No. | and | | | | | |
| I hereby state that | I have reviewed and und | | ts of the above ider | ntified specification, | including the claims, as an | nended by any | | | | | |
| | eferred to above. duty to disclose informa | ation which is know | vn to me to be mate | erial to patentability | as defined in 37 CFR § 1.5 | 56. | | | | | |
| or § 365(a) of any identified below, lead to before that of | PCT International applicable checking the box, any the application on which | cation which design foreign application h priority is claimed | nated at least one conformation for patent or invented. | ountry other than the ntor's certificate, or | ication(s) for patent or inve United States, listed below PCT International applicati | w and have also ion having a filing | | | | | |
| Application No. Country | | | Filing Date | | Priority Claimed (Y | Priority Claimed (Yes/No) | | | | | |
| I hereby claim the | benefit under 35 U.S.C. | § 119(e) of any Un | ited States Provisi | onal Application(s) | listed below. | | | | | | |
| | U.S. Provisional A | | U | | U.S. Filing Date | | | | | | |
| I hereby claim the | 60/002, | | d States application | $n(s)$ or δ 365(c) of δ | 08/30/95 any PCT International App | lication | | | | | |
| designating the Ur United States appl duty to disclose in | nited States, listed below | and, insofar as the onal Application in on to me to be mate | subject matter of e the manner provid rial to patentability | ach of the claims of ed by the first parag as defined in 37 CF | this application is not disc raph of 35 U.S.C. § 112, I R § 1.56 which became av | losed in the prior | | | | | |
| Application No | | | 0 | | • | (patented, pending or abandoned) | | | | | |
| 08/703,83 | | | ST 27, 199 | | | PENDING osecute this application and transact all | | | | | |
| business in the Pat | ent and Trademark Office | e connected therew | vith: | geni(s) the power to | prosecute uns application | and transact an | | | | | |
| Name: LYNN | IE M. CHRISTEN | BURY | | Registration No | 30,971 | | | | | | |
| Send corresponden | ice and direct | | | | Tel. No. | | | | | | |
| telephone calls to. | | | . du Pont de Nemours and Company al - Patents | | (302) 992-54 | (302) 992-5481 | | | | | |
| | | | mington, DE 19898, U.S.A. | | Fax No. (302) 892-794 | Fax No. (302) 892-7949 | | | | | |
| believed to be true; punishable by fine | and further that these st | atements were mad | le with the knowled 01 of Title 18 of th | ige that willful false | s made on information and statements and the like so e and that such willful fals | made are | | | | | |
| jeopai dize the vant | arry of the application of | arry patent issuing | INVENTOR(S) | | | | | | | | |
| Full Name | Last Name | | First Name | | Middle Name | | | | | | |
| of Inventor | FALCO Signature (please sign full | SAVERIO | | Date: / / - C | Date: / / | | | | | | |
| Thorn fact The | | | | | 1/30/11 | Country of Citizenship | | | | | |
| Residence & Citizenship | ARDEN | | State or Foreign Co DELAWARE | ountry | U.S.A. | | | | | | |
| Post Office Address | Post Office Address 1902 MILLER ROA | v n | City ARDEN | | State or Country DELAWARE | Zip Code 19810 | | | | | |
| Full Name | Last Name | 10 | First Name | | Middle Name | 12010 | | | | | |
| of Inventor | FAMODU Signature (please sign full | name): | OMOLAYO | | Date: Visit of Col | | | | | | |
| | Signature (please sign full | - C. | | | 10/2/4 | 1 | | | | | |
| Residence & Citizenship | NEWARK | | State or Foreign Country DELAWARE | | U.S.A. | | | | | | |
| Post Office Address | Post Office Address 216 BARRETT RUN PLACE | | City NEWARK | | State or Country DELAWARE | Zip Code 19702 | | | | | |
| full Name | Last Name | | First Name | | Middle Name | | | | | | |
| f Inventor | RAFALSKI Signature (please signafull | | JAN | | | 30 | | | | | |
| Residence & | City an Auto | | State or Foreign Co | ountry | Country of Citizenship | 1.7 | | | | | |
| itizenship | WILMINGTON | | DELAWARE | | U.S.A. | | | | | | |
| ost Office Address | Post Office Address 2028 LONGCOME | DRIVE | City WILMINGTO | N | State or Country DELAWARE | Zip Code 19810 | | | | | |
| | | | | | | | | | | | |

Docket No.: **BB-1067-B**

DECLARATION AND POWTP OF ATTORNEY - Page 2

Full Name First Name Last Name Middle Name **MICHAEL** RAMAKER of Inventor LEE Signature (please sign full name): Remaßer State or Foreign Country Date: Merka Country of Citizenship Residence & City **DELAWARE GREENVILLE** Citizenship U.S.A. Post Office Post Office Address City State or Country Zip Code 250A RESIDENTIAL DRIVE GREENVILLE Address **DELAWARE** 19807 Full Name Last Name First Name Middle Name **MITCHELL** of Inventor TARCZYNSKI **CHRISTIAN** Signature (please sign full name): Date: Residence & Country of Citizenship State or Foreign Country WEST DES MOINES Citizenship **IOWA** U.S.A. Post Office Post Office Address State or Country City Zip Code 2115 SOUTH 4TH STREET Address **WEST DES MOINES** IOWA 50265 Full Name Last Name Middle Name First Name **CATHERINE** of Inventor **THORPE** Signature (please sign full name): Date: Residence & City State or Foreign Country Country of Citizenship CÁMBRIDGESHIRE Citizenship UK UK Post Office Post Office Address State or Country City Zip Code Address **CAMBRIDGESHIRE** CB4 20 THE BEECHES, UK WOODHEAD DRIVE, 1FY **CAMBRIDGE**

U.S.A.

State or Country

DELAWARE

Zip Code

19810

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Docket Number BB-1067-B

DECLARATION and POWER OF ATTORNEY

As a below named inventor, I hereby declare that: My residence, test office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PLANT METHIONINE SYNTHASE GENE AND METHODS FOR INCREASING THE METHIONINE CONTENT OF THE SEEDS OF PLANTS the specification of which is attached hereto unless the following box is checked: ■ was filed on August 19, 1999 as U.S. Application No. 09/377,431 or PCT International Application No. _____ and was amended on _____ (if applicable). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56. I hereby claim foreign priority benefits under 35 U.S.C. § 119(a)-(d) or § 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or PCT International application having a filing date before that of the application on which priority is claimed. Application No. Filing Date Priority Claimed (Yes/No) Country I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States Provisional Application(s) listed below. U.S. Provisional Application No. U.S. Filing Date 60/002,973 08/30/95 I hereby claim the benefit under 35 U.S.C. § 120 of any United States application(s), or § 365(c) of any PCT International Application designating the United States, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application or PCT International Application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is known to me to be material to patentability as defined in 37 CFR § 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application. Application No. Filing Date Status (patented, pending or abandoned) AUGUST 27, 1996 08/703,829 PENDING POWER OF ATTORNEY: I hereby appoint the following attorney(s) and/or agent(s) the power to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: LYNNE M. CHRISTENBURY 30,971 Registration No.: Send correspondence and direct Tel. No. telephone calls to E. I. du Pont de Nemours and Company (302) 992-5481 Legal - Patents LYNNE M. CHRISTENBURY Wilmington, DE 19898, U.S.A. Fax No. (302) 892-7949 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may eopardize the validity of the application or any patent issuing thereon. **INVENTOR(S)** Full Name Last Name First Name Middle Name **SAVERIO** of Inventor **FALCO** CARL Signature (please sign full name). Date: Residence & Country of Citizenship State or Foreign Country City ARDEN **DELAWARE** U.S.A. Citizenship State or Country Post Office Zip Code Post Office Address City **DELAWARE** 19810 1902 MILLER ROAD ARDEN Address Full Name Middle Name Last Name First Name Ο. of Inventor **FAMODU OMOLAYO** Signature (please sign full name) Date: Country of Citizenship Residence & City State or Foreign Country **NEWARK** Citizenship DELAWARE U.S.A. Post Office Post Office Address State or Country Zip Code City 216 BARRETT RUN PLACE NEWARK **DELAWARE** 19702 Address Full Name Middle Name Last Name First Name **JAN** RAFALSKI **ANTONI** of Inventor Signature (please sign full name) Date: Country of Citizenship Residence & City State or Foreign Country

DELAWARE

WILMINGTON

City

WILMINGTON

2028 LONGCOME DRIVE

Post Office Address

Citizenship

Post Office

Address

Additional Inventors are being named on separately numbered sheets attached hereto.

DECLARATION AND POWT?. OF ATTORNEY - Page 2 Docket No.: BB-1067-B

Full Name First Name Last Name Middle Name **MICHAEL** RAMAKER of Inventor LEE Signature (please sign full name): Date: State or Foreign Country Residence & City Country of Citizenship GŘEENVILLE **DELAWARE** Citizenship U.S.A. Post Office Address Post Office State or Country City Zip Code 250A RESIDENTIAL DRIVE **GREENVILLE DELAWARE** Address 19807 Full Name Last Name First Name Middle Name **TARCZYNSKI MITCHELL** of Inventor **CHRISTIAN** Signature (please sign full name): Date: 5 October 1999 City Residence & State or Foreign Country Country of Citizenship WEST DES MOINES Citizenship **IOWA** U.S.A. Post Office Post Office Address State or Country City Zip Code 2115 SOUTH 4TH STREET **WEST DES MOINES** Address IOWA 50265 **Full Name** Last Name First Name Middle Name **THORPE CATHERINE** of Inventor Signature (please sign full name): Date: Residence & State or Foreign Country City Country of Citizenship **CAMBRIDGESHIRE** Citizenship UK UK Post Office Post Office Address City State or Country Zip Code CAMBRIDGESHIRE Address 20 THE BEECHES, UK WOODHEAD DRIVE, **CAMBRIDGE CB4 1FY**

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DECLARATION and POWER OF ATTORNEY

Docket Number BB-1067-B

| | | LITO | CARD TOWER OF | ATTORNE | · I | | | | | | |
|---|---|------------------------------|--|---|--|---------------------------------|--|--|--|--|--|
| 1 1/64 | ed inventor. Thereby declare that: | | | | | | | | | | |
| My residence, bost of the address and citizenship are as stated below next to my name. | | | | | | | | | | | |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: PLANT METHIONINE SYNTHASE GENE AND METHODS FOR INCREASING THE | | | | | | | | | | | |
| METHIONINE CONTENT OF THE SEEDS OF PLANTS | | | | | | | | | | | |
| the specification of which is attached hereto unless the following box is checked: was filed on August 19, 1999 as U.S. Application No. 09/377,431 or PCT International Application No. and | | | | | | | | | | | |
| | • | | n No. <u>09/377,431</u> | _ or PCT Internat | ional Application No | and | | | | | |
| | t I have saviewed and understand the | | a of the above identified | | -4: | 1 11 | | | | | |
| amendment r | t I have reviewed and understand the eferred to above. e duty to disclose information which | | | | , | | | | | | |
| I hereby claim for | reign priority benefits under 35 U.S. | C. § 119 | (a)-(d) or § 365(b) of any | foreign application | on(s) for patent or inven | tor's certificate. | | | | | |
| identified below, | PCT International application which by checking the box, any foreign app | plication | for patent or inventor's c | other than the Unicertificate, or PCT | ted States, listed below International application | and have also n having a filing | | | | | |
| date before that o Application N | the application on which priority is | claimed | . Filing Date | · | Priority Claimed (Yes/No) | | | | | | |
| repriention | country | | rung Date | | Thornty Claimed (1e | :5/140) | | | | | |
| I hereby claim the | benefit under 35 U.S.C. § 119(e) of | | ted States Provisional A | pplication(s) listed | l below. | | | | | | |
| | U.S. Provisional Application | No. | | | J.S. Filing Date 08/30/95 | | | | | | |
| I hereby claim the | 60/002,973 benefit under 35 U.S.C. § 120 of an | v United | States application(s), or | | | cation | | | | | |
| designating the U | nited States, listed below and, insofa | r as the s | subject matter of each of | the claims of this | application is not disclo | sed in the prior | | | | | |
| duty to disclose in | lication or PCT International Application in PCT Internation which is known to me to l | be mater | ial to patentability as def | ined in 37 CFR δ | 1.56 which became ava | ilable between | | | | | |
| Application No. | he prior application and the national | | International filing date on the control of the con | | patented, pending or a | handanad) | | | | | |
| 08/703,8 | | | ST 27, 1996 | •• | ENDING | Dandonedj | | | | | |
| POWER OF AT | TORNEY: I hereby appoint the following tent and Trademark Office connected | owing at | torney(s) and/or agent(s) | | | nd transact all | | | | | |
| | VE M. CHRISTENBURY | tilelew | | ation No. 30 | .971 | | | | | | |
| | | Γ | | | | | | | | | |
| Send correspondence and direct telephone calls to | | | u Pont de Nemours and | d Company | Tel. No. (302) 992-5481 | | | | | | |
| LYNNE M. CHRISTENBURY | | Legal · | - Patents | | | | | | | | |
| | | Wilmington, DE 19898, U.S.A. | | | Fax No. (302) 892-7949 | | | | | | |
| I hereby declare th | at all statements made herein of my | own kno | wledge are true and that | all statements mad | de on information and b | elief are | | | | | |
| punishable by fine | ; and further that these statements we or imprisonment, or both, under Sec | tion 100 | 1 of Title 18 of the Unite | t willful false state ed States Code and | ments and the like so n I that such willful false | nade are statements may | | | | | |
| eopardize the vali | dity of the application or any patent i | issuing t | hereon. | | · | | | | | | |
| Full Name | Last Name | | INVENTOR(S) First Name | | Middle Name | | | | | | |
| of Inventor | FALCO | | SAVERIO | | CARL | | | | | | |
| | Signature (please sign full name). | | | | | | | | | | |
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| Full Name of Inventor | Last Name FAMODU | | First Name OMOLAYO | | Middle Name O. | | | | | | |
| | Signature (please sign full name): | | 10111021110 | | Date | | | | | | |
| Residence & | City | | Country of Citizenship | | | | | | | | |
| itizenship | NÉWARK | | State or Foreign Country DELAWARE | | U.S.A. | | | | | | |
| Post Office Address | Post Office Address 216 BARRETT RUN PLACE | | City NEWARK | | State or Country DELAWARE | Zip Code 19702 | | | | | |
| ull Name f Inventor | | | | | Middle Name ANTONI | | | | | | |
| Finventor RAFALSKI JAN ANTONI Signature (please sign full name): Date: | | | | | | | | | | | |
| tesidence & | City | | State or Foreign Country | | Country of Citizenship | | | | | | |
| Citizenship ost Office | WILMINGTON | | DELAWARE | | U.S.A. | | | | | | |
| ddress | Post Office Address 2028 LONGCOME DRIVE | | City WILMINGTON | | State or Country DELAWARE | Zip Code 19810 | | | | | |
| | | | | | | | | | | | |

Additional Inventors are being named on separately numbered sheets attached hereto.

DECLARATION AND POWTO OF ATTORNEY - Page 2 Docket No.: BB-1067-B

1)

Full Name Last Name First Name Middle Name RAMAKER of Inventor **MICHAEL** LEE Signature (please sign full name): Date: Residence & City State or Foreign Country Country of Citizenship GREENVILLE Citizenship **DELAWARE** U.S.A. Post Office Post Office Address City State or Country Zip Code **250A RESIDENTIAL DRIVE** Address **GŘEENVILLE DELAWARE** 19807 Full Name Last Name First Name Middle Name **TARCZYNSKI** of Inventor **MITCHELL CHRISTIAN** Signature (please sign full name): Date: Residence & City State or Foreign Country Country of Citizenship Citizenship WEST DES MOINES IOWA U.S.A. Post Office Post Office Address City State or Country Zip Code Address 2115 SOUTH 4TH STREET WEST DES MOINES IOWA 50265 Full Name Last Name First Name Middle Name of Inventor **THORPE CATHERINE** Signature (please sign full name); thenne Thorpe 4th October 1999 Residence & State or Foreign Country Country of Citizenship Citizenship **CAMBRIDGESHIRE** UK UK Post Office Address Post Office City State or Country Zip Code 20 THE BEECHES, Address **CAMBRIDGESHIRE** UK CB4 WOODHEAD DRIVE, **IFY CAMBRIDGE**